

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>me</i>		08/28/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A.S	943	9-20-1
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	9-20-1
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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41	✓
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50	✓

Claim	Date
Final Original	
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions
 staple additional sheet here